



Express Mail Mailing Label No. EV 688844765 US

TRANSMITTAL  
FORM

Application Serial Number	10/084,403
Filing Date	February 25, 2002
First Named Inventor	Salmonsens
Group Art Unit	2123
Examiner Name	Guill
Attorney Docket No.	PXL-047
Patent No.	Not applicable
Issue Date	Not applicable

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input checked="" type="checkbox"/> Copy of Fee Transmittal Form  <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]  <input checked="" type="checkbox"/> Petition for Extension of Time  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application  <input type="checkbox"/> Formal Drawing(s)  <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal  <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> CD(s) for large table or computer program  <input type="checkbox"/> Amendment After Allowance  <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences  <input type="checkbox"/> Appeal Brief (in triplicate)  <input type="checkbox"/> Status Inquiry  <input checked="" type="checkbox"/> Return Receipt Postcard  <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8  <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8  <input type="checkbox"/> Additional Enclosure(s) (please identify below)
---	---	--

## CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator  
Goodwin Procter LLP  
Exchange Place  
Boston, MA 02109  
Tel. No.: (617) 570-1000  
Fax No.: (617) 523-1231  
Customer No. 051414

## SIGNATURE BLOCK

Respectfully submitted,  
  
Date: December 16 2005  
Reg. No. 56,401  
Tel. No.: (617) 570-1057  
Fax No.: (617) 523-1231  
  
Joel E. Lehrer  
Atty/Agent for Applicant(s)  
Goodwin Procter LLP  
Exchange Place  
Boston, MA 02109

	Complete if Known	
	Application Serial Number	10/084,403
	Filing Date	February 25, 2002
	First Named Inventor	Salmonsens
	Group Art Unit	2123
	Examiner Name	Guill
	Attorney Docket No.	PXL-047

METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																																		
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		3. ADDITIONAL FEES																																																																																																		
2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 07-1700. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.		<table border="1"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>130</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>50</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>2,520</td> <td>2,520</td> <td>Request for ex parte reexamination</td> <td></td> </tr> <tr> <td>120</td> <td>60</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>450</td> <td>225</td> <td>Extension for reply within second month</td> <td>450.00</td> </tr> <tr> <td>1020</td> <td>510</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1590</td> <td>795</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>2160</td> <td>1080</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>500</td> <td>250</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>500</td> <td>250</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1000</td> <td>500</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>400</td> <td>400</td> <td>Petitions to the Commissioner (Gp. I)</td> <td></td> </tr> <tr> <td>200</td> <td>200</td> <td>Petitions to the Commissioner (Gp. II)</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Petitions to the Commissioner (Gp. III)</td> <td></td> </tr> <tr> <td>180</td> <td>180</td> <td>Submission of Information Disclosure Statement</td> <td></td> </tr> <tr> <td>790</td> <td>395</td> <td>Filing a submission after final rejection (37 CFR 1.129(a))</td> <td></td> </tr> <tr> <td>790</td> <td>395</td> <td>For each additional invention to be examined (37 CFR 1.129(b))</td> <td></td> </tr> <tr> <td>100</td> <td>100</td> <td>Certificate of Correction for applicant's error</td> <td></td> </tr> <tr> <td>130</td> <td>65</td> <td>Submission of Terminal Disclaimer</td> <td></td> </tr> <tr> <td>Other fee (Specify)</td> <td></td> <td>Request for Continued Examination</td> <td></td> </tr> <tr> <td>Other fee (Specify)</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		120	60	Extension for reply within first month		450	225	Extension for reply within second month	450.00	1020	510	Extension for reply within third month		1590	795	Extension for reply within fourth month		2160	1080	Extension for reply within fifth month		500	250	Notice of Appeal		500	250	Filing a brief in support of an appeal		1000	500	Request for oral hearing		400	400	Petitions to the Commissioner (Gp. I)		200	200	Petitions to the Commissioner (Gp. II)		130	130	Petitions to the Commissioner (Gp. III)		180	180	Submission of Information Disclosure Statement		790	395	Filing a submission after final rejection (37 CFR 1.129(a))		790	395	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		130	65	Submission of Terminal Disclaimer		Other fee (Specify)		Request for Continued Examination		Other fee (Specify)								
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																																	
130	65	Surcharge - late filing fee or oath																																																																																																		
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																																		
130	130	Non-English specification																																																																																																		
2,520	2,520	Request for ex parte reexamination																																																																																																		
120	60	Extension for reply within first month																																																																																																		
450	225	Extension for reply within second month	450.00																																																																																																	
1020	510	Extension for reply within third month																																																																																																		
1590	795	Extension for reply within fourth month																																																																																																		
2160	1080	Extension for reply within fifth month																																																																																																		
500	250	Notice of Appeal																																																																																																		
500	250	Filing a brief in support of an appeal																																																																																																		
1000	500	Request for oral hearing																																																																																																		
400	400	Petitions to the Commissioner (Gp. I)																																																																																																		
200	200	Petitions to the Commissioner (Gp. II)																																																																																																		
130	130	Petitions to the Commissioner (Gp. III)																																																																																																		
180	180	Submission of Information Disclosure Statement																																																																																																		
790	395	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																																		
790	395	For each additional invention to be examined (37 CFR 1.129(b))																																																																																																		
100	100	Certificate of Correction for applicant's error																																																																																																		
130	65	Submission of Terminal Disclaimer																																																																																																		
Other fee (Specify)		Request for Continued Examination																																																																																																		
Other fee (Specify)																																																																																																				
<b>FEE CALCULATION</b> <b>1. FILING/SEARCH/EXAM/SIZE FEES</b> <table border="1"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>300</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>500</td> <td>Utility search fee</td> <td></td> </tr> <tr> <td>200</td> <td>Utility exam fee</td> <td></td> </tr> <tr> <td>250</td> <td>Utility size fee (each add'l 50 pgs. over 100)</td> <td></td> </tr> <tr> <td>200</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>100</td> <td>Design search fee</td> <td></td> </tr> <tr> <td>130</td> <td>Design exam fee</td> <td></td> </tr> <tr> <td>250</td> <td>Design size fee (each add'l 50 pgs. over 100)</td> <td></td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th></th> <th>Number Filed</th> <th>Number Extra</th> <th>Rate</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>- 20 =</td> <td></td> <td>x \$ 50.00 =</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td>- 3 =</td> <td></td> <td>x \$200.00 =</td> <td></td> </tr> <tr> <td colspan="4"> <input type="checkbox"/> Multiple Dependent Claim(s), if any \$360.00 =             </td> <td></td> </tr> <tr> <td colspan="4">TOTAL:</td> <td></td> </tr> <tr> <td colspan="4">SMALL ENTITY DISCOUNT:</td> <td></td> </tr> <tr> <td colspan="4">SUBTOTAL (1)</td> <td>(\$) 0.00</td> </tr> </tbody> </table> <b>2. AMENDMENT CLAIM FEES</b> <table border="1"> <thead> <tr> <th>Claims</th> <th>Highest No. Remaining After Amend.</th> <th>Present Previously Paid For</th> <th>Rate</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total</td> <td>-</td> <td>=</td> <td>x \$ 50.00 =</td> <td></td> </tr> <tr> <td>Indep.</td> <td>-</td> <td>=</td> <td>x \$200.00 =</td> <td></td> </tr> <tr> <td colspan="4"> <input type="checkbox"/> First Presentation of Multiple Dep. Claim + \$360.00 =             </td> <td></td> </tr> <tr> <td colspan="4">TOTAL:</td> <td>(\$)</td> </tr> <tr> <td colspan="4">SMALL ENTITY DISCOUNT:</td> <td>(\$)</td> </tr> <tr> <td colspan="4">SUBTOTAL (2)</td> <td>(\$)0.00</td> </tr> </tbody> </table>		Large Entity Fee (\$)	Fee Description	Fee Paid	300	Utility filing fee		500	Utility search fee		200	Utility exam fee		250	Utility size fee (each add'l 50 pgs. over 100)		200	Design filing fee		100	Design search fee		130	Design exam fee		250	Design size fee (each add'l 50 pgs. over 100)			Number Filed	Number Extra	Rate	Amount	Total Claims	- 20 =		x \$ 50.00 =		Independent Claims	- 3 =		x \$200.00 =		<input type="checkbox"/> Multiple Dependent Claim(s), if any \$360.00 =					TOTAL:					SMALL ENTITY DISCOUNT:					SUBTOTAL (1)				(\$) 0.00	Claims	Highest No. Remaining After Amend.	Present Previously Paid For	Rate	Fee Paid	Total	-	=	x \$ 50.00 =		Indep.	-	=	x \$200.00 =		<input type="checkbox"/> First Presentation of Multiple Dep. Claim + \$360.00 =					TOTAL:				(\$)	SMALL ENTITY DISCOUNT:				(\$)	SUBTOTAL (2)				(\$)0.00	<b>SUBTOTAL (3)</b> (\$ 450.00)	
Large Entity Fee (\$)	Fee Description	Fee Paid																																																																																																		
300	Utility filing fee																																																																																																			
500	Utility search fee																																																																																																			
200	Utility exam fee																																																																																																			
250	Utility size fee (each add'l 50 pgs. over 100)																																																																																																			
200	Design filing fee																																																																																																			
100	Design search fee																																																																																																			
130	Design exam fee																																																																																																			
250	Design size fee (each add'l 50 pgs. over 100)																																																																																																			
	Number Filed	Number Extra	Rate	Amount																																																																																																
Total Claims	- 20 =		x \$ 50.00 =																																																																																																	
Independent Claims	- 3 =		x \$200.00 =																																																																																																	
<input type="checkbox"/> Multiple Dependent Claim(s), if any \$360.00 =																																																																																																				
TOTAL:																																																																																																				
SMALL ENTITY DISCOUNT:																																																																																																				
SUBTOTAL (1)				(\$) 0.00																																																																																																
Claims	Highest No. Remaining After Amend.	Present Previously Paid For	Rate	Fee Paid																																																																																																
Total	-	=	x \$ 50.00 =																																																																																																	
Indep.	-	=	x \$200.00 =																																																																																																	
<input type="checkbox"/> First Presentation of Multiple Dep. Claim + \$360.00 =																																																																																																				
TOTAL:				(\$)																																																																																																
SMALL ENTITY DISCOUNT:				(\$)																																																																																																
SUBTOTAL (2)				(\$)0.00																																																																																																
<b>TOTAL</b> (\$ 450.00)		<b>SUBTOTAL (1)</b> 0.00 <b>SUBTOTAL (2)</b> 0.00 <b>SUBTOTAL (3)</b> 450.00																																																																																																		
<b>CORRESPONDENCE ADDRESS</b> Direct all correspondence to: Patent Administrator Goodwin Procter LLP Exchange Place Boston, MA 02109 Tel. No.: (617) 570-1000 Fax No.: (617) 523-1231 Customer No. 051414		<b>SIGNATURE BLOCK</b> Respectfully submitted,  Date: December 16, 2005 Reg. No.: 56,401 Tel. No.: (617) 570-1057 Fax No.: (617) 523-1231 Joel E. Lehrer Attorney for the Applicants Goodwin Procter LLP Exchange Place Boston, MA 02109																																																																																																		